

Nevada Strategic Action Plan: Maternal and Child Health Program (2016-2020)

The Nevada Division of Public and Behavioral Health (DPBH) Maternal and Child Health (MCH) Strategic Action Plan covers the period between October 1, 2016 and September 30, 2020. This plan is a blueprint for the activities to be undertaken to meet Nevada's priority needs. All activities will involve diverse public and private partners/stakeholders to assist with identifying priorities and monitoring the progress of this plan, making appropriate adjustments to activities as needed towards improving outcome measures.

Domains	Priority	Objectives	Strategies	Activities	National Outcome Measures	Selected National/State	Evidence-based or Informed
Women/ Maternal Health	Improve preconception and interconception health among women of childbearing age	1. Increase the percent of women ages 15-44 receiving routine checks-up in the previous year to 70% by 2020.	Insurance coverage and utilization. Educational campaign on health and human services available	Collaborative meetings with Title V partner programs that enroll women for health insurance	Rate of severe maternal morbidity per 10,000 delivery hospitalizations	NPM 1: Percent of women with a past year preventive visit	Percent of women who enroll in or gain insurance with assistance from partner programs
			Consumer Engagement	Collaborations formalized through signed agreements, subgrants, etc.	Maternal mortality rate per 100,000 live births	SPM 1: Percent of mothers reporting late or no prenatal care	Number of non-traditional programs, providers, or clinics that disseminate Title-V developed materials to raise awareness of
		2. Increase to 77.9% the percent of women receiving prenatal care in first trimester by 2020	Consumer engagement through non-traditional programs such as Community Health Workers, Family Resource Centers and MCH Coalitions.	Work with partners to get appropriate documents and policies approved Update documents, websites, educational information, etc.	Percent of low birth weight deliveries (<2,500 grams) Percent of very low birth weight deliveries (<1,500 grams)		
				Disseminate Title-V developed materials to raise awareness of the well-woman visit, coverage benefits, and how to find a provider.	Percent of moderately low birth weight deliveries (1,500-2,499 grams) Percent of preterm births (<37 weeks)		

					<p>Percent of early preterm births (<34 weeks)</p> <p>Percent of late preterm births (34-36 weeks)</p> <p>Percent of early term births (37, 38 weeks)</p> <p>Perinatal mortality rate per 1,000 live births plus fetal deaths</p> <p>Infant mortality rate per 1,000 live births</p> <p>Neonatal mortality rate per 1,000 live births</p> <p>Post neonatal mortality rate per 1,000 live births</p> <p>Preterm-related mortality rate per 100,000 live births</p>		
Perinatal/Infant Health	Breastfeeding promotion	<p>1. Increase the percent of children who are ever breastfed to 90% by 2020</p> <p>2. Increase the percent of children who are exclusively</p> <p>3. Increase the percent of baby-friendly hospitals in</p>	Maternity Care Practices: Collaborate with Nevada Breastfeeding Program to increase the number of hospitals designated as Baby Friendly in Nevada		<p>Post neonatal mortality rate per 1,000 live births</p> <p>Sleep-related Sudden Unexpected Infant Death (SUID) rate per 100,000</p>	<p>NPM 4: a) Percent of infants who are ever breastfed b) Percent of infants breastfed exclusively through 6 months</p>	Percent of hospitals designated as Baby Friendly by Baby Friendly USA

Child Health	Increase developmental Screening	1. Increase the percent of children (10-71 months) who receive a developmental	Collaborate with MCH partners to train and support the implementation of developmental		Percent of children meeting the criteria developed for school readiness (DEVELOPMENTAL)	NPM 6: Percent of children, ages 10 through 71 months, receiving a developmental	Percent of partners that serve children 10-71 months receiving Title-V funded training in past year
	Promote healthy weight	Increase % of children who are physically active	Develop training materials and distribute to MCH partners Partner with Learn the Signs Act Early, Bright Futures, Home Visiting and others on a campaign to educate parents on how to use the developmental screening tool Collaborate with health professionals using telehealth to reach rural/frontier populations		Percent of children in excellent or very good health	NPM 8: Percent of children 6-11 who are physically active at least 60 minutes per day	
Adolescent Health	Improve preconception	Increase the percent of adolescents aged 12-17 with a preventive medical visit in the past year to 78% by 2020	Partner with school-based health centers to promote and incentivize adolescent health services		Percent of children in excellent or very good health	NPM 10: Percent of adolescents, ages 12 through 17, with a preventive medical visit in the past year.	Percent of schools that participate in programs to increase the rate of adolescent well-visits
	Promote healthy weight	Increase the percent of middle school and high school students who are physically active at least 60	Collaborate with Chronic Disease Section to increase the percent of schools that adopt a state physical		Percent of children and adolescents who are overweight or obese (BMI at or above the 85th percentile)	NPM 8: Percent of Adolescents 12-17 who are physically active at least 60 minutes per day	Percent of schools that adopt a state physical activity plan/policy

	Reduce teen pregnancies	<p>Reduce pregnancies among adolescent females aged 15 to 17 years to 36.2 pregnancies per 1,000 by 2020</p> <p>Reduce pregnancies among adolescent females aged 18 to 19 years to 105.9 pregnancies per</p>	Collaborate with State Abstinence Education Grant Program (AEGP) and the State Personal Responsibility Education Program	Collaborative meetings with partners to ensure evidence-informed education is provided	<p>Adolescent mortality rate ages 10 through 19 per 100,000</p> <p>Adolescent motor vehicle mortality rate, ages 15 through 19 per 100,000</p> <p>Adolescent suicide rate, ages 15 through 19 per 100,000</p> <p>Percent of children with a mental/behavioral</p> <p>Percent of children 6 months through 17 years</p> <p>Percent of adolescents, ages 13 through 17, who</p> <p>Percent of adolescents, ages 13 through 17, who</p> <p>Percent of adolescents, ages 13 through 17, who</p>	SPM 2: A. Percent of teenage pregnancies and B. Percent of repeat teen births	
Children with Special Health Care Needs	Improve care coordination	<p>Increase the percent of children with special health care needs with a medical home in the past year to 53.3% by 2020</p> <p>Increase the percent of children without special health care needs with a medical home in the past year to 54.8% by 2020</p>	<p>Identify and outreach to population groups with the greatest need (e.g. racial/ethnic group, payor, rural/urban)</p> <p>Provide education to providers on the components of medical home</p>	<p>Develop a Medical Home Portal website</p> <p>Develop educational materials on the benefits of a medical home</p>	<p>Percent of children with special health care needs (CSHCN) receiving care in a well-functioning system</p> <p>Percent of children in excellent or very good health</p>	NPM 11: Percent of children with and without special health care needs having a medical home	<p>Percent of providers/practices receiving education or technical assistance about medical home</p> <p>Percent of partners conducting outreach on the access and benefits of medical home</p>

		Increase the number of WIC, Home Visiting, Healthy Start, and other Increase the number of referrals to	Conduct outreach to families about availability and benefits of the medical		Percent of children ages 19 through 35 months, who have received the 4:3:1:3(4):3:1:4 series of Percent of children 6 months through 17 years Percent of adolescents, ages 13 through 17, who Percent of adolescents, ages 13 through 17, who Percent of adolescents, ages 13 through 17, who		
Cross-cutting/ Life Course	Reduce substance use during pregnancy	Reduce the percent of women who smoke during pregnancy	Partner with Nevada Tobacco Prevention and Control Program to promote use of the	Develop educational materials and media campaign on dangers of children's exposure to	Rate of severe maternal morbidity per 10,000 delivery hospitalizations	NPM 14a: a) Percent of women who smoke during pregnancy b) Percent SPM 3: Percent of women who misuse substances during pregnancy	Percent of women who received at least one counseling session from the
	Reduce children's exposure to second-hand smoke	Reduce the percent of children who are exposed to secondhand smoke	Collaborate with MCH partners to ensure pregnant women have access to smoking cessation services		Maternal mortality rate per 100,000 live births		Percent of anti-tobacco and substance use mass media campaigns
		Increase the percent of women who call the quitline for assistance	Promote sobermomshealthybabies website		Percent of low birth weight deliveries (<2,500 grams)		Percent of pregnant women calling the quitline for assistance
		Reduce the percent of women using substances during pregnancy			Percent of very low birth weight deliveries (<1,500 grams) Percent of moderately low birth weight Percent of preterm births (<37 weeks) Percent of early preterm births (<34 weeks) Percent of late preterm births (34-36 weeks)		

	Increase adequate insurance coverage among children	Increase the percent of adequately insured children	Collaborate with MCH partners to provide information on the benefits available through the Affordable Care Act	Develop educational information and materials	Percent of early term births (37, 38 weeks) Perinatal mortality rate per 1,000 live births plus fetal deaths Infant mortality rate per 1,000 live births Neonatal mortality rate per 1,000 live births Post neonatal mortality rate per 1,000 live births Preterm-related mortality rate per 100,000 live births Sleep-related Sudden Unexpected Infant Death Percent of children in excellent or very good health Percent of children with special health care needs (CSHCN) receiving care in a well-functioning system	NPM 15: Percent of children ages 0 through 17 who are adequately insured	Percent of calls to Nevada 2-1-1 inquiring/requesting health insurance benefits information
		Increase the percent of callers to Nevada 2-1-1 inquiring/requesting health insurance benefits information	Increase outreach and enrollment of mothers and children into Medicaid and Nevada CHIP	Post information on Title V webpage	Percent of children without health insurance		

		<p>Collaborate with MCH partners to ensure assistance with all aspects of the enrollment and renewal is provided</p>	<p>Increase collaborations with programs to ensure adequate number of navigators are trained and available to assist individuals/families to apply for health insurance.</p> <p>Continue funding Community Health Workers (CHWs) to do outreach on benefits of enrollment.</p>		
--	--	--	--	--	--